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CONFIRMATION NO. 7648

SERIAL NUMBER 09/771,314	FILING OR 371(c) DATE 01/26/2001 RULE	CLASS 422	GROUP ART UNIT 1743	ATTORNEY DOCKET NO. 32020-8001US1	
APPLICANTS Graham D. Marshall, City of Fox Island, WA; Duane K. Wolcott, City of Fox Island, WA; Daniel Ericson, City of Rochester, MN; Don C. Olson, City of Gig Harbor, WA;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/01/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature Initials		STATE OR COUNTRY WA	SHEETS DRAWING 6	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 5
ADDRESS 25096					
TITLE APPARATUS AND METHOD FOR AUTOMATED MEDICAL DIAGNOSTIC TESTS					
FILING FEE RECEIVED 633	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		